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THE DEMOCRATIC REPUBLIC OF CONGO SITUATION

This update concerns the situation of Congolese refugees and asylum seekers in countries in the region.

As of 31 January 2019, 825,002 Congolese refugees are UNHCR together being hosted in African countries. In January 2019 alone, development partners launched the 2019-2020 some 6,318 Congolese fled to neighboring countries, with a Regional Refugee Response Plan (RRRP) on 11 particularly significant increase in refugee flows to December 2018 for US\$743 million to help respond Uganda, Zambia and Kenya. to the needs of Congolese refugees in Africa.

> ANGOLA 37,308 MALAWI 23,075

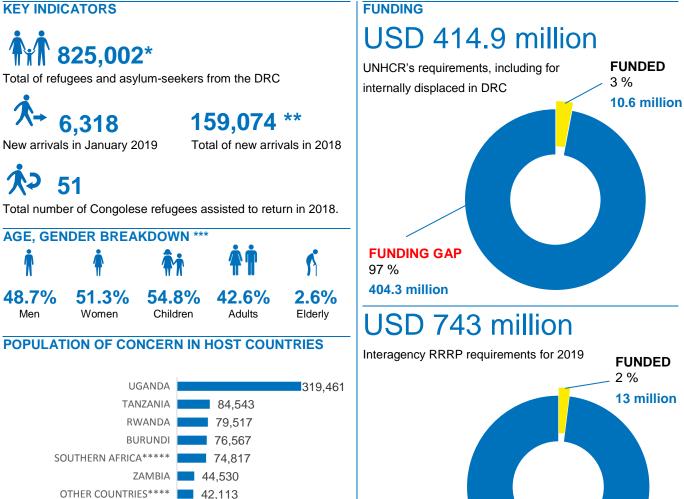
REPUBLIC OF THE CONGO 15,715

CENTRAL AFRICAN REPUBLIC 1.848

SOUTH SUDAN 15,652

ZIMBABWE 9,856

KEY INDICATORS



*** This age and gender breakdown includes figures from Angola, Botswana Burundi, Chad, Central African Republic, Kenya, the Kingdom of Eswatini, Madagascar, Malawi, Mozambique, Republic of the Congo, Rwanda, South Sudan, Uganda, the United Republic of Tanzania, Zambia and Zimbabwe. **** Other countries include Chad and Kenya.

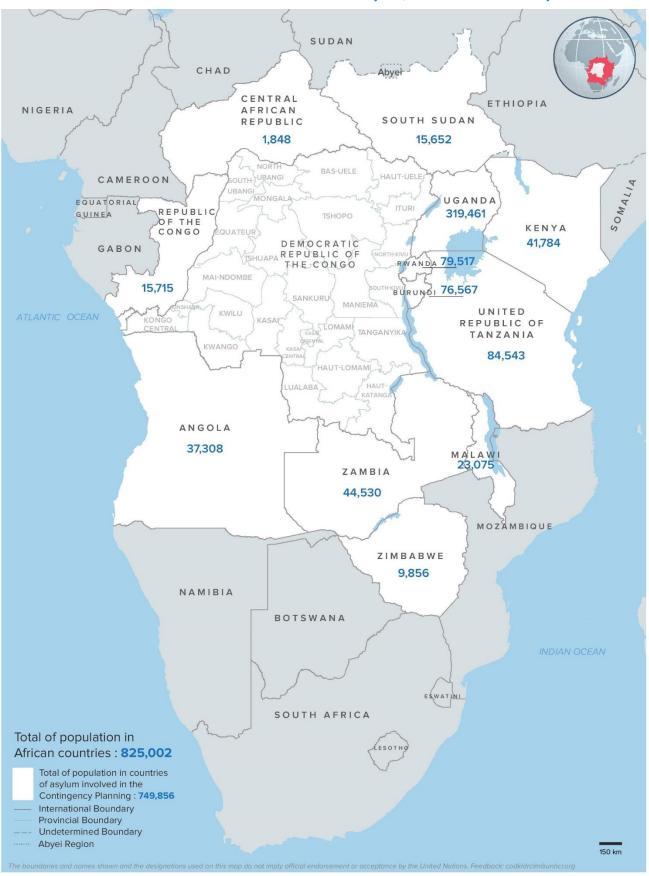
FUNDING GAP

730 million

98 %

***** Southern Africa includes Botswana, the Kingdom of Eswatini, Lesotho, Madagascar, Mozambique, Namibia and South Africa.





NUMBER OF REFUGEES & ASYLUM-SEEKERS in countries of asylum, as of the end of January 2019

Creation date: 31 January 2019 Sources: UNHCR - Kinshasa Feedback: codkidrcim@unhcr.org



Regional Highlights and Operational Context

- A total of 825,002 Congolese refugees and asylum-seekers are being hosted in countries in Africa, which have generously maintained an open door policy in granting asylum to old and new asylum seekers.
- UNHCR and UNDP have come together to address both the short-term impacts of displacement on host communities and the long-term needs of refugees who cannot go back home. Within the framework of the 2019-2020 Regional Refugee Response Plan (RRRP) for the DRC situation, the two UN agencies published on January 16, 2019 a booklet highlighting joint humanitarian-development programming initiatives which are being designed and implemented by UNHCR and UNDP teams to build the resilience in areas hosting Congolese refugees, returnees and other displaced populations of concern. Further, these will set the foundation for joint programming with all RRRP partners: regionally, nationally and with the concerned populations themselves, in order to support an environment conducive for protection and durable solutions.

PROVINCES OF ORIGIN of Congolese Refugees

Nord-Ubangi

Bas-Uele

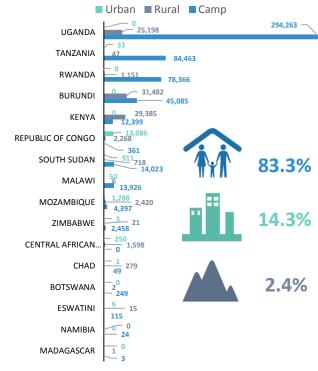
Haut-Uele

RETURNEES As of 31 December 2018 FRITRE BURKINA FASO HANA CENT SOUTH SUDA Ĥ UNHCR Regional Offic 0 UNHCR Sub-Office UNHCR Field Office 0 UNHCR Field Unit International Boundary Undefined Boundary Abyei Region Administrative bo Direction towards the DR ZAMBIQU

MONTHLY RETURNEES TREND in 2018







Equateu Tshuapa Mai-Ndomb Sankuru Kinshas Kwilu Kongo Central sai ntral Kasai Lomami Oriental Tanganyika Kwango Haut-Lomami Lualaba Percent of total of persons 0.004% - 0.231% 0.231% - 1.272% 1.272% - 5.474% 5.474% - 19.259%

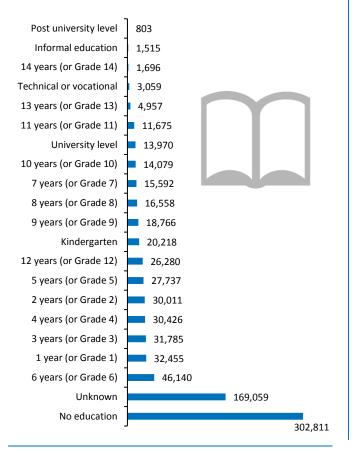
The above map includes figures from Angola, Botswana, Burundi, Chad, Central African Republic, Kenya, the Kingdom of Eswatini, Madagascar, Malawi, Mozambique, Namibia, Republic of the Congo, Rwanda, South Sudan, the United Republic of Tanzania, Uganda, Zambia and Zimbabwe.

19.259% - 48.501%



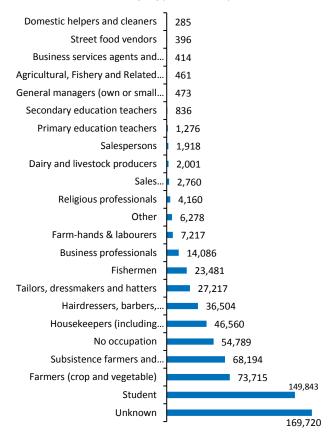
EDUCATION LEVEL OF REFUGEES

Number of Persons per Level

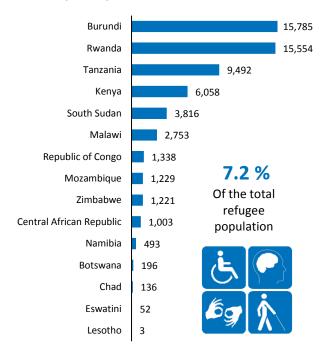


OCCUPATION OF REFUGEES

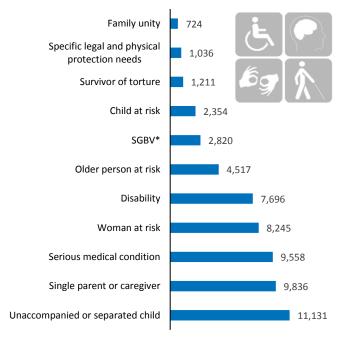
Number of Persons by Type of Occupation



NUMBER OF PERSONS WITH SPECIFIC NEEDS Per Country of Asylum



NUMBER OF PERSONS WITH SPECIFIC NEEDS Per Category of Concern



* Sexual and Gender Based Violence (SGBV)

The above charts include figures from Botswana, Burundi, Chad, Central African Republic, the Kingdom of Eswatini, Kenya, Lesotho, Malawi, Namibia, Mozambique, Republic of Congo, Rwanda, South Sudan, the United Republic of Tanzania and Zimbabwe.



Achievements during the Reporting Period

ANGOLA

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OPERATIONAL CONTEXT & COORDINATION

- Relocation of urban refugees was completed in January, which brought the total refugee population in Lóvua settlement to 19,700.
- On January 21, 2019 there was a visit of high-level representatives from the European Union to Lunda Norte Province.

PROTECTION

There was a reduction in figures of *refoulement* cases, as well as of arbitrary detentions. Those figures
were higher between October-November due to Operação Transparência and Operação Resgate by
the Angolan Government.

EDUCATION

- The construction of three permanent schools was concluded in Lóvua settlement, with the support of the main project donors the Government of Japan and the Government of the People's Republic of China.
- Main challenge is that permanent schools will be destined for primary education only. Funds are still being found to continue informal classes for secondary education.

HEALTH

• In Lóvua settlement some 5,175 medical consultations were held, including for 1,558 children under five-years, 347 prenatal and 143 postnatal care consultations.



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FOOD SECURITY & NUTRITION

 Food commodities required for January distributions were procured and delivered on time to relevant extended distribution points in Lóvua, to ensure that refugees receive the planned food basket at full ration.

SITE PLANNING, SHELTER & NFIs

 A total of 378 solar panels were installed on the solar street light of Lóvua settlement and the neighboring host communities.

WASH

 The construction of three new boreholes was finalized, bringing the total status of litres per person per day to 18.

LIVELIHOODS

RRRP partners visited Lóvua settlement to conduct resilience and livelihood assessments as they
intended to have a joint implementation approach for livelihoods in 2019. The aim of this approach was
to reduce dependency on food aid, starting with 1,500 families.

BURUNDI

OPERATIONAL CONTEXT & COORDINATION

A coordination meeting with actors and partners, including refugees working in the area of SGBV was
organized at Kinama refugee camp in Muyinga. The meeting recommended sensitization campaigns
aiming at reducing physical violence and increasing good management of cases by involving members
of the SGBV working group in the camp.



PROTECTION

• Some 934 Congolese refugees registered during the reporting period, including 291 new arrivals. Refugee status was granted to 519 asylum seekers from the DRC.



- Three convoys of 468 individuals (114 households) were transferred from the Cishemere transit center (448) and from several urban communities in Bujumbura (20) to Nyankanda refugee camp and received core relief items. Among them, there were some 114 persons with specific needs, including 29 women at risk, 23 single parents, 12 persons with disabilities, six SGBV survivors, 34 separated children and seven unaccompanied minors (UAMs). Two UAMs were reunited with relatives upon arrival, while the others were temporarily placed in host families.
- A total of 93 resettlement cases were submitted and some 336 Congolese refugees departed for resettlement countries.

EDUCATION

- Following a one week training facilitated by the AUF (Agence Universitaire de la Francophonie), final tests and interviews were organized for selected beneficiaries of the DAFI and joint DAFI/AUF scholarships. Some 14 refugees from Bwagiriza and Kavumu were selected for full DAFI scholarships, while 10 were selected for the DAFI/AUF Program.
- There are still overcrowded classes (between 70 and 80 student per classroom) and lack of school materials/manuals in refugee camps, as well as need for qualified teachers.

HEALTH

- Sensitization sessions on self-medication, malnutrition, HIV/AIDS and dehydration, were organized for some 8,662 refugees in Kavumu and Bwagiriza camps. Campaigns on birth planning and the use of contraceptives were also undertaken.
- BCG, Polio and Measles vaccinations were carried out; Measles vaccinations reached 100% coverage.
- Ebola preparedness remains an issue due to lack of adequate material and equipment in transit centers and refugee camps.
- The ratio of consultations per medical staff remains extremely high with some 79 persons per day/per staff in refugee camps.



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FOOD SECURITY & NUTRITION

- Food distributions took place in all four camps and cooking briquettes were distributed, however the quantities were insufficient.
- On January 23, 2019 a World Bank mission took place in Bwagiriza refugee camp to assess the humanitarian situation on the ground, in particular related to nutrition, safety nets and additional support to refugees and host communities.
- Nutrition support/supplementation assistance targeted only pregnant women and lactating mothers, as well as persons living with the HIV/AIDS and chronic diseases. The diet of the persons with specific needs has yet to be improved.
- There is a lack of sufficient financial means to assist malnourished refugees in camps.

SITE PLANNING, SHELTER & NFIs

- A total of 300 hygienic kits distributed to vulnerable refugee girls aged 12 and above, living in Bwagiriza
 refugee camp, by UNHCR's partner Jesuit Refugee Service, in collaboration with the camp's school
 headmasters and teachers.
- Some 108 individual houses were constructed and 56 refugee housing units assembled for the newly
 arrived refugees in Nyankanda refugee camp.
- Solar lamps were distributed in Bwagiriza refugee camp, but given the limited number of solar lamps, priority was given to households having at least one child enrolled in secondary school to help students study at night.
- The lack of briquettes remains a challenge affecting refugees' daily subsistence and contributing to deforestation in the surrounding areas.



WASH

- Water network and water points were maintained and defective parts were replaced. Individual houses and latrines were disinfected and work was undertaken to chlorinate the water.
- Water supply remains a challenge in the newly constructed Makombe transit center in Rumonge and in the Cishemere transit center in Cibitoke.





MALAWI

OPERATIONAL CONTEXT & COORDINATION

• UNHCR is monitoring secondary movements of refugees crossing Malawi to other neighboring countries, without being registered, pending the launch of biometric registration at the border points by the Ministry of Homeland and Security (MHS),

PROTECTION

 Access to transport and basic needs, including water and food continued to be a major challenge at all the border points.

HEALTH

- Health services continued to be provided in Karonga transit centre, including integrated management of childhood illnesses, vaccination, deworming and growth monitoring, however, only for under five-years children.
- Health services in Karonga transit centre, Chitipa and Mbilima reception centers need to be strengthened, including for infection prevention and control measures which are not fully followed. Purchase of health passport to be used at the district hospitals cost MK 200 and ost of the asylum seekers cannot afford it.



FOOD SECURITY & NUTRITION

- Full food distribution was carried out in Dzaleka camp, also thanks to the support received from the USAID.
- Food is not provided at the way stations in Chitipa and Mbilima, despite that new arrivals may stay up to a week before being cleared by Immigration.

REPUBLIC OF CONGO

HEALTH

- Partner Terre sans Frontières conducted regular medical consultations at the CSI integrated health center in Betou and at the local Hospital in Impfondo. A total of 1,382 patients were medically treated, of which 247 under five-years and 1,135 over five-years.
- WHO provided 166 boxes of medicines to asylum seekers located in the Plateaux department.
- A total of 98 Congolese refugee women went for prenatal consultations by a medical doctor. About 41 births were attended by qualified staff (no delivery at home) and one delivered at home, while 29 family planning and 24 after birth consultations were conducted.
- Limited access for the refugees located in the areas where health facilities were closed, especially in Thary, Lopola, Mokabi, Mouale
- There is lack of nutritional inputs (F75, F1000, plumpynuts, Plumpysup, CSB, CSB++, Oil, Sugar, etc.) for the severe and moderate acute malnutrition, as well as insufficiency of medical consumables (transfusers, catheters, infusers, syringes) and lack of isolation sites.

FOOD SECURITY & NUTRITION

• A total of 977 households of 3, 462 individuals received food assistance from the WFP in Makotimpoko, Bouemba and Mompongo hosting areas.

SITE PLANNING, SHELTER & NFIs

- Some 6,473 asylum seekers received NFIs in Makotimpoko, Bouemba and Mompongo. During the first distribution, families of five and more members were targeted. The commodities received were essentially kitchen sets, blankets, mosquito nets, matresses, and jerry cans.
- Partner Armee du Salut identified and donated matresses, jerry cans, mosquito nets, blankets, and clothes to some 487 individuals in Makotimpoko, with a priority to pregnant and breast feeding women, elder persons, orphans and disabled persons.
- A total of 12 hangars, 14 hygienic latrines and four showers were constructed in Makotimpoko, Bouemba and Mompongo. UNICEF provide some 1,560 aqua-tabs to asylum seekers in Makotimpoko and Bouemba.



LIVELIHOODS

 Phytosanitary products were provided to four groups of farmers in Impfondo and some 22 goats were given to foster income generating activities (IGAs).

RWANDA

PROTECTION

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- One anti-SGBV club was established at Groupe Scolaire Muhondo, a public school hosting some 143
 refugee children in upper secondary. The club aimes at supporting UNHCR and partner staff in the
 sensitization activities targeting school going children.
- In Kiziba camp, 22 refugees with disabilities were provided assistive devices: 12 people with disabilities got compensatory shoes and 10 people with physical disabilities got crutches.
- Child neglect continues to be a major challenge in Kiziba camp, while at the same time attendance for the community sensitization programs remains low.

EDUCATION

- Some 4,595 refugee children enrolled in early childhood development programmes, while 15,131 in primary and 8,030 in secondary education. All students received uniforms and scholastic materials.
- The construction of 16 classrooms and 12 latrines at GS Kageyo started, to accommodate refugee children from Gihembe camp.
- Congested classrooms due to the change from double shift to single shift in primary as decided by the government
- Access to healthcare is still required for 1,695 Congolese students enrolled in secondary schools, universities, and vocational training centres away from the refugee camp
- About 135 Congolese refugees performed well at national exam and qualified for the schools of excellence, but could not get funded due to limited budget.

HEALTH

- A total of 15,121 persons benefited from outpatient medical consultation in total. Voluntary Medical Male Circumcision (VMMC) was performed on 8 persons in the Gihembe Health Center
- Screening and testing of hepatitis B conducted during a sport event organized by the American Refugee Committee in Gihembe. About 111 persons were screened for hepatitis, among whom six were tested positive
- There is limited space for admission and lack of an isolation center in Kigeme, as well as lack of micro cuvettes for anaemia testing in all camps.
- There are also gaps in Ebola preparedness, including among others the need for infrared thermometers, personal protective equipment and trainings.

FOOD SECURITY & NUTRITION

- About 82 new moderately acute malnourished (MAM) and 15 new severely acute malnourished (SAM) admitted. The management of severe and moderate malnutrition for children under five-years, pregnant and lactating mothers was done in clinics, both outside and inside the camps.
- There is lack of supplementary feeding for refugees with chronic illnesses (except diabetics) as well as elderly refugees.



SITE PLANNING, SHELTER & NFIs

- A total of 500 plastic sheets were distributed in Gihembe camp for households requiring renovation of the roofs.
- The construction of the new classes for early childhood development programs in Gihembe camp was finalized and approximately 700 students started using the facilities.
- There is an urgent need to expand/extend all the Congolese refugee camps to accommodate the increasing number of refugees.
- An estimated 1,500 shelters are still covered in plastic sheeting in Gihembe and Nyabiheke camps, creating discomfort and poor living conditions, especially during rainy seasons. Further, in Kigeme and Mugombwa camps, shelters are old and in need of rehabilitation and about 931 shelters have old roofing.



WASH

- The partner Church of Jesus Christ of Latter-day Saints (LDS) funded the construction of 48 latrines in Nyabiheke camp.
- An average of 20.06 litres per person per day was provided in Kiziba camp, however the average water supply in Nyabiheke camp remains 15.3 litres per person per day and 16 litres in Gihembe, which are below the minimum standard of 20 liters per person per day.

UNITED REPUBLIC OF TANZANIA

OPERATIONAL CONTEXT & COORDINATION

 Intra-camp directives issued by the Government in mid-2018 on refugee-run businesses and the common markets remained in place. Opportunities for self-reliance have been severely limited because of these restrictions, which increased the risk of refugees resorting to negative coping mechanisms. Advocacy with the Government of Tanzania to lift all livelihood restrictions is on-going.

PROTECTION

- A total of 68 individuals from the DRC were resettled to the USA (45), Canada (22) and Australia (1), with an additional 241 individuals submitted for resettlement.
- During the reporting period, a total of 2,126 people were reached through legal awareness raising campaigns and an additional 92 people were reached through different legal services and representation.
- Partner International Rescue Committee (IRC) conducted an awareness raising session in Nyarugusu camp on "Start, Awareness, Support, Action" (SASA!), a community mobilization approach to prevent violence against women and the spread of HIV. These sessions were attended by 137 participants.
- Following the closure of all border entry points, access to territory and asylum continued to remain a challenge with reports of new arrivals being turned away at the borders. Advocacy with the Government of Tanzania is on-going.

EDUCATION

- Inspectors from the Ministry of Education carried out two-day lesson observations at Sifa Primary School in Nyarugusu camp. The primary objective of the inspection was to see how teachers were putting into practice the skills they learnt during teacher training and capacity building sessions. Tanzania currently implements a country of origin curriculum in the camps although efforts to integrate refugee education into the national curriculum in the country of asylum are on-going.
- A total of 16 parents and guardians of persons with specific needs received targeted support on social and psychosocial services on how best to look after children under their care.
- A shortage of classrooms continues to exist due to funding shortfall and additional classrooms are still required in Nyarugusu Camp.

HEALTH

- The crude mortality rate and under five-years mortality rate were both within the SPHERE minimum standards. The leading cause of morbidity in January was malaria, followed by upper respiratory tract infection, lower respiratory tract infection, urinary tract infection and diarrhea. Over 21,000 consultations were done at various health facilities serving the Congolese refugee population with a facility utilization rate of 3.2, which was within the standard threshold of 1-4 new consultations per person/per year.
- Poor health infrastructures in the Congolese zones of Nyarugusu camp and limited access to health services continue to remain a challenge.

FOOD SECURITY & NUTRITION

- Food entitlements for January were distributed at 100% of the full basket.
- More funding is required to extend the existing waiting shelter at center one in Nyarugusu camp which cannot accommodate the entire population.

SITE PLANNING, SHELTER & NFIs

 A total of five protection referral cases received core relief items (CRIs), including blankets, sleeping mats, jerry cans and kitchen sets.



• A serious shortage of CRIs continues to exist due to budgetary constraints. There has been no general distribution of CRIs since 2015.

WASH

- Average water supply in Nyarugusu Camp stood at 20.76 per person per day which is over the SPHERE minimum standards.
- In an effort to reduce fuel consumption, one borehole was solarized in Nyarugusu camp bringing the total number of solarized boreholes in Nyarugusu Camp to four.
- Due to funding shortages, a number of WASH gaps remain. More funding is required to construct additional bathing shelters, latrines and water points and procure hygiene supplies so as to reduce the risk of a disease outbreak.

UGANDA

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OPERATIONAL CONTEXT & COORDINATION

- A total of 3,526 persons arrived from the DRC in the South West operation mainly through the borderentry points of Bunagana, Lake Albert (Sebagaro & Nsonga), Ishasha/Kihihi, Ntoroko and Nteko.
- On January 16, 2019 UNHCR together with the Office of the Prime Minister of Uganda (OPM) and partner agencies officially launched a communication system for refugees and asylum seekers in Uganda. The new inter-agency Feedback, Referral and Resolution Mechanism (FRRM) aims at augmenting the existing information sharing system in refugee settlements and provide safe, accessible and reliable communication channels to refugees and asylum seekers.
- The second sector plan for refugees and host communities in the 11 refugee-hosting districts, was launched on 25 January 2019. The Health Sector Integrated Refugee Response Plan (HSIRRP) Plan, developed within the Government-led Comprehensive Refugee Response Framework (CRRF), is the second of in a series of sector plans following the Education Response Plan for Refugees and Host Communities.

PROTECTION

- A plan of action was put in place to address the backlog of newborn baby additions in the Southwest. According to data from the health centres, an estimated 3,200 babies are pending registration in Nakivale and Rwamwanja Refugee Settlements.
- The 'Safe from the Start' SGBV mainstreaming Project that was implemented in Kyangwali Refugee Settlement from the last quarter of 2018, was successfully completed.

HEALTH

• UNHCR continues implementation of the Ebola preparedness activities such as: case identification; surveillance; infection prevention and control; and behavioral change communication.

FOOD SECURITY & NUTRITION

• The 2018 Food Security and Nutrition Assessment (FSNA) data collection exercise was concluded on 24 January 2018 in the 13 refugee settlement and 11 refugee hosting districts.

SITE PLANNING, SHELTER & NFIs

- With continued new arrivals to Kyaka II Refugee Settlement, the OPM plot allocation team demarcated 2,700 new plots (each 30m x 30m) and a total of 2,138 newly registered families were relocated. The new system of 12m x 20m plots will not be initiated in Kyaka II until MLHUD have the resources to initiate the development of zonal plans, in Nakivale and Kyangwali Refugee Settlements.
- A decrease in funding for technical staffing puts at risk the ability for UNHCR to adequately monitor and supervise prioritised, multi-sector construction projects. With the projected increase in numbers of new arrivals, UNHCR will not have adequate funding to provide complete emergency shelter kits.

WASH

- Overall per capita access to water was above 17 litres per person per day (lppd), though sections of some settlements reported to access less than 12 lppd.
- Sanitation coverage continued to improve, though marginally, from 68% to 69%, as communities constructed family latrines. Household level sanitation improvements and observable behavior change, indicated adoption of positive hygiene practices.



ZAMBIA

Calls

OPERATIONAL CONTEXT & COORDINATION

 UNHCR, working together with the Government of Zambia, co-ordinated the North Western Provincial Ebola Virus Disease sensitization meetings at the border points and Meheba refugee settlement. A total of 140 key selected persons participated during the sensitizations.

PROTECTION

- 100% biometric registration of new arrivals in all settlements and in urban areas was undertaken by the office of the Commissioner for Refugees and all those registered were issued with refugee certificates or proof of registration for asylum seekers.
- There is need for adequate refugee shelters and transit facilities in Meheba and Mayukwayukwa
 refugee settlements to receive new arrivals. In Lusaka, the 60-bed space capacity at Makeni transit
 centre remains inadequate as the centre hosts vulnerable new arrivals, way above its normal capacity.
 Tents have continued to act as a mitigation measure. Safe spaces for men affected by SGBV or for
 security reasons are scarce, as most shelters in Lusaka accommodate women and children only.

EDUCATION

- The Ministry of General Education deployed a total of 12 qualified teachers to Mantapala, bringing the total number of teachers to 55 teachers.
- In Mantapala, the total number of enrolled pupils from baby class to grade nine was 5,514 (71.7% of them under 18 years) in both schools.
- There is need for construction of additional class rooms and of more teachers to reduce the high teacher-learner ratio in Mantapala. In addition, there is need for deployment of teachers for special education and provision of learning materials for people with disabilities so that the disabled are not left out in the education system of Mantapala.

HEALTH

- A total of 175 pregnant women attended the antenatal clinic and were all tested for HIV and malaria. About 35 of the attendees reacted positive to malaria test. Malaria still remains the leading cause of morbidity in both Meheba and Mayukwayukwa refugee settlements (1,578 and 1,502 confirmed cases reported, respectively). The current on-going rainy season has contributed to the problem.
- About 557 cases of malnutrition were reported among pregnant and lactating women in January in Mantapala, with one pregnant woman admitted at the clinic for severe malnutrition.
- Essential drugs are not adequately stocked, as a result, they run out quickly because Mantapala health clinic is not yet integrated in the Zambia health system so that it can receive its own consignment of drugs. Currently, the facility obtains its drugs from the stocks of the Nchelenge health clinic and the hospital which have their own population to service.
- Upper respiratory tract infections were notably the second cause of morbidity in the settlements (Meheba and Mayukwayukwa had 394 and 267 cases, respectively).

FOOD SECURITY & NUTRITION

- In Mantapala, a Mini Food Distribution was conducted to provide a total of 4.08 metric tons (MT) of wet food to 598 new arrivals, and a total of 3.5 MT of beans and maize meal was transported to border areas to feed refugees in the border reception centres who were awaiting to be relocated to Mantapala and Meheba settlements.
- Construction of three permanent and secured distribution centres commenced, with permanent waiting structures for refugees in Mantapala Settlement.

SITE PLANNING, SHELTER & NFIs

 In January, in Mantapala settlement a total of 130 new arrivals out of the total of 206 received core relief items (CRIs) comprising shelter materials or plastic sheeting, sleeping mats, blankets, mosquito nets, buckets, solar lumps and cooking sets.

WASH

• A total of 2,053 households in Mantapala had family latrines and bath shelters while a total of 1,890 households were living with no durable toilets and bath shelters. As the number of new arrivals increases, the number of households without latrines is also rising.



• A transitional facility was earmarked for construction in Meheba and will be replicated in two other blocks.



LIVELIHOODS

 UNHCR in collaboration with partners and Ministry of Agriculture trained a total of 242 farmers on Fall Army Worms management, and distributed pesticides and knapsack sprayers to 175 affected farmers in the settlement. The farmers will now start spraying their fields with pesticides in order to control the spread of Army worms.

Financial Information

UNHCR is very grateful for the financial support provided by donors who have contributed to our activities with unearmarked and broadly earmarked funds as well as for those who have contributed directly to the situation or operations.

Donors who have contributed to the DRC situation:

Germany

European Union

- IKEA Foundation
 - Sweden
- African Development Bank
- Miscellaneous private donors

OTHER SOFTLY EARMARKED CONTRIBUTIONS

Luxembourg | Norway | Republic of Korea | United States of America | World Food Programme | Private donors

UNEARMARKED CONTRIBUTIONS

Sweden 90.4 million | Denmark 54.9 million | Norway 44.5 million | Netherlands 37.5 million | United Kingdom 31.7 million | Germany 27.3 million | Switzerland 15.1 million

Algeria | Austria I Belgium | Canada | Estonia | Indonesia | Monaco | Montenegro | Peru | Qatar | Republic of Korea | Russian Federation | Saudi Arabia | Serbia | Singapore | Slovakia | Sri Lanka | Thailand | United Arab Emirates | Uruguay | Private donors



For more information: http//reporting.unhcr.org



Working in Partnership

Partners in the 2019-2020 Regional Refugee Response Plan (RRRP) for the DRC include:

Action Africa Help International | Action contre la Faim | ADRA Zambia | African Initiative for Relief and Development | African Women and Youth Action for Development | Agency for Technical Cooperation and Development | American Refugee Committee | Association of Volunteers in International Service | Building Resources Across Communities | Care and Assistance For Forced Migrants | CARE International | Caritas | Catholic Organization for Relief and Development Aid | Catholic Relief Services | Church World Service | Community Environmental Management and Development Organization | Danish Refugee Council | Finn Church Aid | Good Neighbours Tanzania | Humane Africa Mission | Humanitarian OpenStreetMap Team | Humanity & Inclusion | Impact Initiatives | International Aid Services | International Rescue Committee | Jesuit Refugee Services | Johanniter | Kabarole Research and Resource Centre | Lutheran World Federation | Lutheran World Relief | Médecins du monde | Medical Teams International | Mines Advisory Group | Norwegian Refugee Council | Oxfam | People in Need | Plan International | Programme Against Malnutrition | Samaritan's Purse | Save the Children International | Self Help Africa | Uganda Red Cross Society | United Nations Food and Agriculture Organization | United Nations International Organization for Migration | United Nations Capital Development Fund | United Nations Development Programme | United Nations High Commissioner for Refugees | United Nations International Children's Emergency Fund | United Nations Population Fund | United Nations Entity for Gender Equality and the Empowerment of Women | United Nations World Food Programme | United Nations World Health Organization | War Child Holland | Water Mission | Windle International Uganda | Women Legal Aid Center | World Vision International

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ATT MEMBER

2019-2020 Regional Refugee Response Plan (RRRP) for the DRC situation

2018 Regional Refugee Response Plan (RRRP) for the DRC situation



UNHCR Brochure on Underfunded Situations in 2018

UNHCR and UNDP Joint Programming for the DRC situation

News & Stories / click for access

UNHCR and UNDP join forces to find sustainable solutions for Congolese refugees and host communities

REGIONAL COORDINATION

- Ann Encontre is the Regional Refugee Coordinator (RRC) for the DRC situation, covering Congolese refugees in Angola, Burundi, Central African Republic, Rwanda, Republic of the Congo, South Sudan, the United Republic of Tanzania, Uganda, Zambia and other countries receiving refugees from the DRC.
- UNHCR leads and coordinates the response to the DRC refugee emergency, ensuring that the response is coherent with developments within the DRC, in close collaboration and consultation with relevant government counterparts, and with the support of UN Country Teams and other humanitarian and developments partners.

CONTACTS

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